

CLAIMS ONLY							Application Number <i>10/034092</i>	Filing Date			
							Applicant(s)				
							* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1			/				51				
2				/			52				
3					/		53				
4						/	54				
5							55				
6							56				
7							57				
8							58				
9							59				
10							60				
11			/				61				
12				/			62				
13					/		63				
14						/	64				
15							65				
16							66				
17							67				
18							68				
19							69				
20							70				
21			/				71				
22				/			72				
23					/		73				
24						/	74				
25							75				
26							76				
27							77				
28							78				
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39							89				
40							90				
41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep	4						Total Indep				
Total Depend	21	21	44	44			Total Depend				
Total Claims	28		28	28			Total Claims				